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SERIAL NUMBER 09/418,397	FILING DATE 10/14/1999 RULE	CLASS 370	GROUP ART UNIT 2662	ATTORNEY DOKKE NO. 50944.4100
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APPLICANTS

MICHAEL C. WHITFIELD, VALBOME, FRANCE;

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REMY P. GAUGUEY, LE CANNET, FRANCE;** CONTINUING DATA ***** *None*** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/23/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 9	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Michael J. Simpson</i> Initials <i>DM</i>				

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TITLE

METHOD AND APPARATUS FOR EARLY DETECTION OF DTMF SIGNALS IN VOICE TRANSMISSIONS OVER AN IP NETWORK

FILING FEE RECEIVED 2660	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER 09/418,397	FILING DATE 10/14/99	CLASS 370	GROUP ART UNIT 273/2132	ATTORNEY DOCKET NO. 50944.4100
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APPLICANT

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CONTINUING DOMESTIC DATA***
VERIFIED

371 (NAT'L STAGE) DATA***
VERIFIED

FOREIGN APPLICATIONS***
VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/23/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FRX	SHEETS DRAWING 9	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
Verified and Acknowledged <u>DM</u> Examiner's Initials		<u>DM</u> Initials			

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TITLE	METHOD AND APPARATUS FOR EARLY DETECTION OF DTMF SIGNALS IN VOICE TRANSMISSIONS OVER AN IP NETWORK
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FILING FEE RECEIVED \$908	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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